

SRF Disbursement Request Form

Participant Information

| | | | |
|---|---|---|--------------|
| Name: | City of West Lafayette | SRF Loan Number: | WW141079 07 |
| DUNS Number: | 04 455 2636 | CCR Number: | 6NKJ2 |
| Request Number: | 19 - REVISED | | |
| Mailing Address: | 711 West Navajo Street | | |
| City: | West Lafayette | State: | IN |
| ZIP: | 47906 | | |
| Contact Person: | Judith C. Rhodes, Clerk-Treasurer | Contact Phone Number: | 765-775-5150 |
| Authorized Representative: | Mayor John R Dennis, or Cl-Tr J. Rhodes | Authorized Representative Phone Number: | 765-775-5100 |
| If requesting reimbursement to the Participant by wire transfer please provide the following information: | | | |
| Bank Name: | | Bank Routing Number: | |
| Account Name: | | Account Number: | |

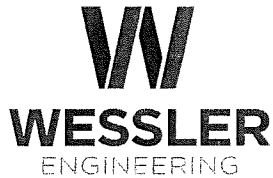
Loan Information

| | | | |
|---|---|--|----|
| Description of work for which claim is being made (services, fees, type of work, etc.): | Sheraton and Fairway Knolls Lift Station Improvements | | |
| Is any part of this claim funded by an alternate funding source? | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local Funds): | | | \$ |
| Is any part of this claim funded by the Indiana Brownfields Program? | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| Has the Participant paid the request and is now seeking reimbursement? | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter. | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| Are there Green Project Reserve components involved in this request? | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| If yes, please describe: | | | |

Loan Financial Information

| | | | |
|---|------------------------------|--|--------------------------|
| Original Loan Amount: | | \$ | 2,610,000.00 |
| Total Amount of Previous Disbursements: | | \$ | 825,919.00 |
| Balance Available After this Disbursement: | | \$ | 1,770,922.00 |
| Amount to Contractor for this Request: | | \$ | 13,159.00 |
| Is any part of this request a partial or final release of retainage to the contractor? | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | |
| Contractor Name: | Wessler Engineering | DUNS Number: | 08 153 1352 |
| Mailing address: | 6219 S East Street | | |
| City: | Indianapolis | State: | IN |
| ZIP Code: | 46227 | | |
| Wiring Information: | | | |
| Bank Name: | | Bank Routing Number: | |
| Account Name: | | Account Number: | |
| Retainage Amount for this Request: | | \$ | |
| Participant requests that the retainage amount be held by SRF: | | | <input type="checkbox"/> |
| Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above: | | | <input type="checkbox"/> |
| Participant requests that the retainage amount be sent to the following bank: | | | <input type="checkbox"/> |
| Bank Name: | | Bank Routing Number: | |
| Account Name: | | Account Number: | |
| Total Amount of this Request: | | \$ | 13,159.00 |
| The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement, that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1). | | | |
| Authorized Representative Signature: | | Date: | SEP 01 2015 |
| For Internal Use Only: | | | |
| Approved By: | | Date: | |
| GPR | \$ | | |

Revised on July 1, 2014



RECEIVED
AUG 12 2015
UTILITY DIRECTOR

More than a Project™

INVOICE

To: CITY OF WEST LAFAYETTE
MR. DAVID S. HENDERSON, UTILITY DIRECTOR
500 SOUTH RIVER ROAD
WEST LAFAYETTE, INDIANA 47906

Invoice Number: 27905 *Corrected*
June 25, 2015 - Reissued August 7, 2015

Project: 174515.00 WEST LAFAYETTE – SHERATON & FAIRWAY KNOLLS LIFT STATION

Manager: GARY L. RUSTON

Professional Services for the Period: 5/1/15 to 5/31/15.

PHASE: .68 RESIDENT PROJECT REPRESENTATIVE
TASK: .01 SHERATON & FAIRWAY KNOLLS LIFT STATION - RPR

| Professional Services | Bill Hours | Bill Rate | Charge |
|--|---------------|-----------|------------------|
| Senior Project Manager I | 2.00 | \$ 165.00 | \$ 330.00 |
| Senior Resident Project Representative | <u>133.00</u> | \$ 90.00 | <u>11,970.00</u> |
| Total Labor | 135.00 | | \$ 12,300.00 |

| | | |
|---------------------|--|-----------|
| Reimbursables | | |
| Travel | | \$ 858.61 |
| Total Reimbursables | | \$ 858.61 |

Total Project Invoice Amount \$ 13,158.61

Wessler Engineering, Inc.
GARY L. RUSTON
Project Manager

| | | | | |
|-------------------|--------|--------|--------|----------|
| Aged Receivables: | | | | |
| CURRENT | 30-60 | 60-90 | 90-120 | OVER 120 |
| \$13,158.61 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

WWTU
AUG 12 2015

All invoices are due upon receipt. A late charge of 1.5% will be added to any unpaid balance after 30 days.

Billing Backup

Friday, August 07, 2015

WESSLER ENGINEERING, INC.

Invoice 27905 Dated 8/7/2015

12:06:17 PM

| | | |
|---------|-----------|---|
| Project | 174515.00 | W. LAFAYETTE - SHERATON & FAIRWAY KNOLLS LIFT STATION |
| Phase | 00068 | CONSTRUCTION OBSERVATION |
| Task | 000001 | SHERATON & FAIRWAY KNOLLS LS RPR |

Professional Services

| | | | Bill Hours | Bill Rate | Charge |
|-------------------------------------|----------------------------------|---------------|------------|-----------|----------|
| Senior Project Manager I | | | | | |
| Senior Project Manager I | | | | | |
| 521 | ROBINSON, BRADLEY | 5/15/2015 | 2.00 | 165.00 | 330.00 |
| | Deliver phone to Bil, visit site | | | | |
| Sr. Resident Project Representative | | | | | |
| Sr. Resident Project Representative | | | | | |
| 528 | McGUIRE, SAMUEL | 5/1/2015 | 5.50 | 90.00 | 495.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/4/2015 | 3.00 | 90.00 | 270.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/5/2015 | 4.00 | 90.00 | 360.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/6/2015 | 5.00 | 90.00 | 450.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/7/2015 | 8.50 | 90.00 | 765.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/8/2015 | 5.00 | 90.00 | 450.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/11/2015 | 3.00 | 90.00 | 270.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/12/2015 | 7.00 | 90.00 | 630.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/13/2015 | 6.50 | 90.00 | 585.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/14/2015 | 8.00 | 90.00 | 720.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/14/2015 Ovt | 2.00 | 90.00 | 180.00 |
| 528 | McGUIRE, SAMUEL | 5/15/2015 | 8.00 | 90.00 | 720.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/18/2015 | 9.00 | 90.00 | 810.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/19/2015 | 11.50 | 90.00 | 1,035.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/20/2015 | 9.00 | 90.00 | 810.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/21/2015 | 7.00 | 90.00 | 630.00 |
| | Inspection | | | | |
| 528 | McGUIRE, SAMUEL | 5/26/2015 | 7.00 | 90.00 | 630.00 |
| | Inspection | | | | |

| Project | 174515.00 | W. LAF - SHERATON & FAIRWAY KNOLLS LS | Invoice | 27905 |
|---------|-------------------------------|---------------------------------------|------------|------------------|
| 528 | McGUIRE, SAMUEL Inspection | 5/27/2015 | 8.00 90.00 | 720.00 |
| 528 | McGUIRE, SAMUEL Inspection | 5/28/2015 | 8.00 90.00 | 720.00 |
| 528 | McGUIRE, SAMUEL Inspection | 5/29/2015 | 8.00 90.00 | 720.00 |
| | Totals | | 135.00 | 12,300.00 |
| | Total Labor | | | 12,300.00 |

Reimbursables

Travel

| | | | |
|--------------------------|--|---------------|---------------|
| EX 00000000532 5/4/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/5/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/6/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/7/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/11/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/12/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/13/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/14/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/18/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/19/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/20/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/26/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/27/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| EX 00000000532 5/28/2015 | McGUIRE, SAMUEL / Overnight - West Lafayette | 15.00 | |
| | Total Reimbursables | 210.00 | 210.00 |

Unit Billing

Mileage - Company vehicles

| | | | |
|--------------------|---------------------|---------------|---------------|
| VEH. #0703 | 859.0 Miles @ 0.575 | 493.93 | |
| VEH. #1001 | 30.0 Miles @ 0.575 | 17.25 | |
| VEH. #1203 | 239.0 Miles @ 0.575 | 137.43 | |
| Total Units | | 648.61 | 648.61 |

Total this Task \$13,158.61

Total this Phase \$13,158.61

Total this Project \$13,158.61

Total this Report \$13,158.61